



smith & hopen, p.a. JUN 0 7 2005

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INTELLECTUAL PROPERTY LA W

| То: | U.S. I | Patent & Tradem | ark Office | From: | Ronald E. Smith | |
|--------|--------|-----------------|--------------|-------------|---------------------|------------------|
| Attn: | Mich | nael A. Brown | | Client: | 1320.02 | |
| Fax: | (703) | 872-9306 | | Pages: | 15 including covers | heet |
| Phone: | (703) | 308-2682 | ` | Date: | June 7, 2005 | |
| Re: | USSN | 109/682,353 | | CC: | Bailey Walsh & Co. | |
| □ Urge | nt | ☑ For Review | ☐ Please Cor | nment | ☐ Please Reply | ☐ Please Recycle |
| D F: | | | | | | |

Dear Examiner Brown:

In response to the non-final office action mailed on March 22, 2005, we enclose the following:

- Amendment Transmittal with Certificate of Facsimile Transmission under 37 CFR 1.8(a) dated June 7, 2005 (2 pages); and
- Amendment B with Certificate of Facsimile Transmission under 37 CFR 1.8(a) dated June 7, 2005 (12 pages).

Very respectfully,

Ronald E. Smith Reg. No. 28,761

JUN 0 7 2005

BY: _______

The documentation accompanying this transmission contains information from the Law Office of Smith & Hopen, P.A., which is confidential and/or privileged. The information is intended only for the use of the individual or entity named on this sheet. If you are <u>not</u> the intended recipient, you are hereby notified that any disclosure, copying, distribution, or the taking of any action in reliance upon the contents of this telecopied information is strictly prohibited. If you have received this transmission in error, please notify us by telephone immediately, so that we can arrange for the return of the original documents to us at no cost to you.

RECEIVED CENTRAL FAX CENTER

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

JUN 0 7 2005

Application No.

: 09/682,353

Confirmation No.: 8397

Applicant: Filed:

: Richard M. Hall : 08/24/2001

Art Unit

: 3764

Examiner

: Michael A. Brown

Docket No.

: 1320.02

Customer No.

: 21901

For

: Obesity Treatment Aid

Faxed to Technology Center 3700 at (703) 872-9306 Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

1. Transmitted herewith is an amendment for this application.

STATUS

2. Applicant is an independent inventor. A statement was already filed.

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply. Applicant believes that an extension of term is required. A Petition and Fee for Extension of Time is attached hereto.

CERTIFICATE OF FACSIMILE TRANSMISSION

(37 C.F.R. 1.8 (a))

I HEREBY CERTIFY that this Amendment A, including Introductory Comments, Amendments to the Specification, Amendments to the Claims, and Remarks, is being transmitted by facsimile to the United States Patent and Trademark Office, Art Unit 3764, Atm: Mr. Michael A. Brown, (703) 872-9306, on June 7, 2005.

Dated: June 7, 2005

Deborah Preza

(Amendment Transmittal-page 1)

FEE FOR CLAIMS

The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below: 4.

| | (Col.1) | • | (Col. 2) | (Col. 3) | (Col. 3) SMALL ENTITY | | | | |
|---|--------------|------------|---------------------------------------|------------------|-----------------------|---------------|--------------|-------------|--|
| Claims Remaining After Amendment | | | Highest No. Previously Paid For | Present Extra | Rațe | Addit. Fee | | | |
| Total | 34 | Minus | 35 | = 0 | x \$25 = | \$0 | | | |
| Indep. | 4 | Minus | 5 | = 0 | x \$100 = | \$0 | | | |
| First Pre | sentation of | Multiple I | Dependent Clain | 1 | + \$180 = | \$0 | _ | | |
| | | | | | Total Addit. Fee | \$0 | | | |

If the entry in Col. 1 is less than the entry in Col. 2, write "O" in Col. 3,

No additional fee for claims is required.

Very respectfully,

Reg. No. 28,761

Tel. No.: (727) 507-8558

Ronald E. Smith Smith & Hopen, P.A.

15950 Bay Vista Drive, Ste. 220

Clearwater, FL 33760

(Amendment Transmittal-page 2)

If the "Highest No. Previously Paid For" IN THIS SPACE (Column 2, Row 1) is less than 20, enter "20".

^{•••} If the "Highest No. Previously Paid For" IN THIS SPACE (Column 2, Row 2) is less than 3, enter "3". The "Highest No. Previously Paid For" (Total or Indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

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Application No.

: 09/682,353

Confirmation No.: 8397

Applicant: Filed:

: Richard M. Hall : 08/24/2001

TC/A.U.

: 3764

Examiner

: Michael A. Brown

Docket No.
Customer No.

: 1320.02 : 21,901

For

: Obesity Treatment Aid

Faxed to Technology Center 3700 at (703) 872-9306

Commissioner for Patents

P. O. Box 1450

Alexandria, VA 22313-1450

AMENDMENT B

Introductory Comments

Sir:

In response to the Examiner's Action mailed 03/22/2005, having a shortened statutory period for response set to expire 06/22/2005, the above-identified patent application is amended a second time as follows:

Amendments to the Specification begin on page 2 of this paper.

Amendments to the Claims are reflected in the listing of claims that begins on page 4 of this paper.

Remarks begin on page 10 of this paper.